THIS DECISION HAS BEEN APPEALED. THE FOLLOWING IS THE RELATED SOAH DECISION NUMBER:

SOAH DOCKET NO. 453-03-4028.M2

NOTICE OF INDEPENDENT REVIEW DECISION

June 23, 2003 MDR Tracking #: M2-03-1107-01 IRO Certificate #: IRO 4326 has been certified by the Texas Department of Insurance (TDI) as an independent review organization (IRO). The Texas Workers' Compensation Commission (TWCC) has assigned the above referenced case to for independent review in accordance with TWCC Rule §133.308 which allows for medical dispute resolution by an IRO. has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, relevant medical records, any documents utilized by the parties referenced above in making the adverse determination, and any documentation and written information submitted in support of the appeal was reviewed. The independent review was performed by a ____ physician reviewer who is board certified in neurosurgery which is the same specialty as the treating physician. The ___ physician reviewer has signed a certification statement stating that no known conflicts of interest exist between him or her and any of the treating physicians or providers or any of the physicians or providers who reviewed the case for a determination prior to the referral to for independent review. In addition, the reviewer has certified that the review was performed without bias for or against any party to this case.

Clinical History

This patient is a truck driver who hit a deep rut in the road on ____, jarring him and throwing his head forward. He developed neck, left shoulder, and left arm pain. An MRI from 05/15/00 revealed herniated discs on the left at C5-6 and C6-7 with impingement on the neural foramina. He subsequently underwent an anterior cervical fusion on 11/03/00 at C5-6 and C6-7. This patient continued to have pain in his neck and left upper extremity. An electromyography (EMG) study dated 03/07/02 revealed left ulnar elbow compression and left carpal tunnel syndrome.

Requested Service(s)

Left ulnar nerve decompression and left carpal tunnel release

Decision

It is determined that the proposed left ulnar nerve decompression and left carpal tunnel release are medically necessary to treat this patient's condition.

Rationale/Basis for Decision

This patient has physical exam abnormalities consistent with ulnar neuropathy at the elbow, both motor and compressive signs. These results correlate with electromyography and nerve conduction studies performed on 03/07/02. In addition, these studies also concluded a positive carpal tunnel syndrome, in which a carpal tunnel release would be indicated. Both surgical procedures are medically necessary and can be done at the same. Therefore, it is determined that the proposed left ulnar nerve decompression and left carpal tunnel release are medically necessary.

This decision by the IRO is deemed to be a TWCC decision and order.

YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the decision and has a right to request a hearing.

If disputing a spinal surgery prospective decision a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within 10 (10) days of your receipt of this decision (20 Tex. Admin. Code 142.5 (c)).

If disputing other prospective medical necessity (preauthorization) decisions a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) days of your receipt of this decision (28 Tex. Admin Code 148.3).

This Decision is deemed received by you 5 (five) days after it was mailed (28 Tex. Admin Code 102.4(h) or 102.5(d)). A request for hearing should be sent to: Chief Clerk of Proceedings, Texas Workers' Compensation Commission, P.O. Box 40669, Austin, Texas, 78704-0012. **A copy of this decision should be attached to the request.**

The party appealing the decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute (Commission Rule 133.308 (t)(2)).

Sincerely,